Sunflower County: Permit #: 6 - 40445 Irrigation Equipment Driller: Date drilling completed: 6-2-05

State Well Report

Part 1

Mississippi Department of Environmental Quality
Office of Land and Water Resources
P.O. Box 10631
Jackson, MS 39289-0631
(601)961-5210
(601)354-6938 (fax)

For Office Use Only:	
Aquifer:	_
Well #: <u>H-157</u>	
L. S. Elevation:	_
E-log #:	_

State Law requires that this report be prepared by the driller in detail and filed with the Department within 30 days of completion of drilling of the well.

30 days of completion of drilling of the well.	_
Well Owner Information	Well Location
Owner Name Pentecost Brothers	33 41 8.8 "Longitude: 31, 31, 4
Mailing Address: Box 52	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
	SE . SE 17 - 21N - 3W
Doddsville, MS 38736	SE 1/4 SE 1/4 Sec 17 Twn 21 N Rng 3W
Doddsville, MS 38736 City State Zip Code	Distance Direction Nearest Town
Telephone No. (2 Miles North of Doddsville
Telephone No. ()	
Well I	
Purpose of Well (circle one) Home Industrial Public Supply	Arrigation (Fish Culture Other) Replacement
C 2 0 C	migation Tibil Culture
Date well drilling started: $6-2-05$ Date w	well drilling completed: $6-2-05$
If flowing, method of flow regulation: Valve Other (d	escribe)
Static Water Level: 51 feet above or below (circle one) l	and surface Date measured: $6-3-05$
Method of Measurement (circle one) steel tape electric tape	air line other
Hole depth: 127' Well depth: 127'	
Type of grout (circle one): Cement Bentonite Mix	
	PVC Sch 40
Casing length: 87 feet Casing diameter: 16	inches Type of casing:
Screen length: 40 feet Screen diameter: 16	inches Type of screen: <u>PVC Sch 40</u>
Screen slot size:050_inches Setting depth: From _	see backfeet tofeet
Type of completion (circle all applicable): Gravel packed Under	reamed Telescoped Open hole Natural Development
Other (describe):	
Top of lap pipe or reduction in casing:feet. If tel	lescoped or more than one screen, describe on back of page
Logs run (circle all applicable): No log run Electric Gamma Ray	Density Sonic Neutron Other:
Name of organization running log(s):	
I certify that the well was drilled, constructed, and completed in a	eccordance with all applicable requirements of the Mississippi
Department of Environmental Quality and/or the Mississippi Dep	partment of Health regulations and state laws.
Irrigation Equipment Inc.	$D + M \sim 2M$
Patrick M. Chism 0695	Tatrick My Chin
Print Name of Water Well Contractor and License No.	Signature of Water Well Contractor

RECEIVED

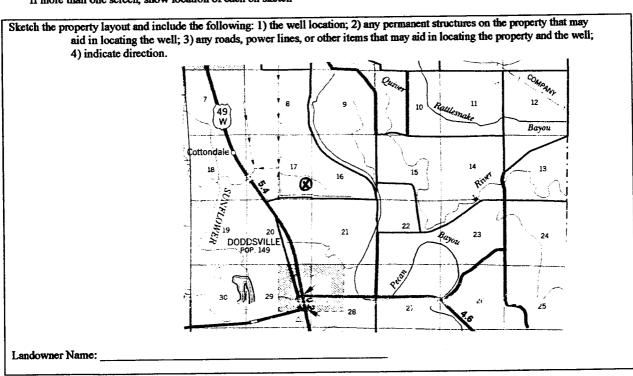
JUN 2 9 2005

BY: OLWR

Ground Level

Description of Formations Encountered	From	То
Clay	0	45
Med. Sand/gravel	46	75
Coarse Sand/gravel Med. Sand	76	95
	96	105
Coarse Sand/gravel	106	127
76 95		\vdash
Screen 76-95 Screen 108-127	 	
Screen 100-121	 	
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If more than one screen, show location of each on sketch



Signature of Water Well Contractor

STATE WELL REPORT

County: Sunflower Permit#: W 40445 Irrigation Equipment Driller: 6-3-05

Part 2 Pump Installer's Completion Report Mississippi Department of Environmental Quality Office of Land and Water Resources P.O. Roy 10631

P.O. Box 10631 Jackson, MS 39289-0631 (601)961-5210 (601)354-6938 (fax)

For Office Use Only:		
Aquifer:		
Well #: H-157		
Elevation:		

(60	01)354-6938 (fax)
This report should be prepared by the pump installer in installation of pump.	detail and filed with the Department within 30 days of the
Well Owner Information	Well Location
Owner Name: Pentecost Brothers	Latitude:Longitude:
Mailing Address: Box 52	Method of Lat/Long (circle one): Conventional Survey,
	USGS quad, Hand-held GPS, Survey-grade GPS
Doddsville, MS 3873	SE 1/2 SE 1/2 Sec 17 Twn 21N Rng 3W
City State Zip Code	Distance Direction Nearest Town
Telephone No. ()	2 Miles North of Doddsville
Totoprose No.	Nuines
Pump Type Circle one	Power Type Circle one
Air Lift Jet Submersible	Diesel Engine Gasoline Engine Natural Gas
Bucket Piston Turbine	Electric Motor Hand Tractor PTO
Centrifugal Rotary Flowing Well	Windmill Other (specify):
Other (specify):	Horse Power Rating of Motor:
Date Pump Installed: 6-3-05	Setting Depth: 80 feet
Rated Pump Capacity: 2500 Gallons Per Minute	Number of Stages: 2
Pump Test Data	Method of Measuring Water Level Circle one
Date Well Tested:	Air Line Electric Measuring Line Steel Tape
Static Water Level (A):Feet Below Land Surface	Other (specify):
Pumping Water Level (B):Feet Below Land Surface	Outer (specify).
Drawdown [(B) - (A)]:Feet Below Land Surface	For flowing well, measured shut in head: feet
Test Pumping Rate:Gallons Per Minute	Well yieldedGPM with a drawdown of
Duration of Pump Test (minimum 4 hours):hours	feet afterhours of pumping
I HEREBY CERTIFY that the above statements are true to the be	est of my individige.
Patrick M. Chism 0695 Print Name of Pump Installer and License No. (if applicable)	Signature of Pump Installer

RECEIVED

JUN 2 9 2005

BY: OLWR